

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

Post Office Box 789

☐Check if different
than previously
reported. (ACC)

Salem

OR

97308

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

02

01

2008

through

02

29

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles S. Oakes

Signature of Treasurer

Electronically Filed by Charles S. Oakes

Date

03

20

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	9	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		35850.65
(b) Cash on Hand at Beginning of Reporting Period	61864.88	
(c) Total Receipts (from Line 19)	71151.12	108964.12
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	133016.00	144814.77
7. Total Disbursements (from Line 31)	112796.29	124595.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20219.71	20219.71
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	230448.71	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M M D D Y Y W Y
0 2 0 1 2 0 0 8

To:

M M D D Y Y W Y
0 2 2 9 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	16810.00	19030.00
(i) Itemized (use Schedule A)	27302.60	28887.60
(ii) Unitemized	44112.60	47917.60
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	1000.00
(c) Other Political Committees (such as PACs)	44112.60	48917.60
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	17038.52	20046.52
13. All Loans Received	10000.00	40000.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	71151.12	108964.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	71151.12	108964.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	20800.48	21560.71
(ii) Non-Federal Share.....	36978.61	38330.13
(b) Other Federal Operating Expenditures.....	38652.81	40072.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	96431.90	99963.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	16364.39	24631.60
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	16364.39	24631.60
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	112796.29	124595.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	75817.68	86264.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	44112.60	48917.60
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44112.60	48917.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	59453.29	61633.33
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	59453.29	61633.33

SCHEDULE L (FEC Form 3X)

6 / 49

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full)
Oregon Republican Party

NAME OF ACCOUNT
KEY LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	3636.50	3636.50
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	3636.50	3636.50
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	3636.50	3636.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Steven Anderson

Mailing Address 14100 Heritage Ln

City

Arlington

State

OR

Zip Code

97812-6503

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 1 / 2 0 0 8

Transaction ID: 80306.C94573

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Gaylord W. Bennett

Mailing Address 26225 SE Wally Rd

City

Boring

State

OR

Zip Code

97009-8488

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Transaction ID: 80225.C94065

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Gaylord W. Bennett

Mailing Address 26225 SE Wally Rd

City

Boring

State

OR

Zip Code

97009-8488

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 8

Transaction ID: 80306.C94428

Amount of Each Receipt this Period

600.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Morris H. Bergman

Mailing Address 324 Woodbridge Ct SE

City

Salem

State

OR

Zip Code

97302-3860

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Transaction ID: 80310.C94659

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mr. William H. Bishop

Mailing Address 6825 SW Raleighwood Ln

City

Portland

State

OR

Zip Code

97225-1924

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Transaction ID: 80306.C94527

Amount of Each Receipt this Period

225.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Brian Boquist

Mailing Address 1860 Hawthorne Ave NE Ste 390

City

Salem

State

OR

Zip Code

97301-0495

FEC ID number of contributing
federal political committee.

C

Name of Employer
OR House of Representativ-
es

Occupation
Rep. for OR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 0 8

Transaction ID: 80218.C93934

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 49

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

A. Craig Brooks

Mailing Address 5353 NW Coyner Ave

City

Redmond

State

OR

Zip Code

97756-9247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Holland & Brooks, LLP

Occupation
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 8

Transaction ID: 80218.C93936

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. John D. Bryan

Mailing Address PO Box 1929

City

Lake Oswego

State

OR

Zip Code

97035-0019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Transaction ID: 80306.C94533

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Knute Buehler

Mailing Address 1122 NW Foxwood Pl

City

Bend

State

OR

Zip Code

97701-8606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Orthopedic Center of the
Casca

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Transaction ID: 80306.C94411

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Charles Carlson

Mailing Address 1311 Victorian Way

City

Eugene

State

OR

Zip Code

97401-7020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Transaction ID: 80306.C94529

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Leroy Cheney

Mailing Address 1915 Westlake Loop

City

Newberg

State

OR

Zip Code

97132-1500

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 2 / 2 0 0 8

Transaction ID: 80218.C93938

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Joseph J. Cholick

Mailing Address 9541 NW Skyline Blvd

City

Portland

State

OR

Zip Code

97231-2634

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: 80306.C94226

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 49

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Mrs. Kathleen J. Collins

Mailing Address PO Box 1309

City

Lakeview

State

OR

Zip Code

97630-0174

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	0		2	0	0	8

Transaction ID: 80306.C94530

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Lester J Hawkins

Mailing Address 4473 SE Aldercrest Rd

City

Milwaukie

State

OR

Zip Code

97222-4774

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oregon Decorative Rock IncOccupation
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	0	8

Transaction ID: 80218.C93937

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mark L. Holloway

Mailing Address 13221 SW 68th Pkwy Ste 420
8824 SW Firview Pl., Beaverton

City

Portland

State

OR

Zip Code

97223-8371

FEC ID number of contributing
federal political committee.

C

Name of Employer
Holloway Investment Advis-
orsOccupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	2		2	0	0	8

Transaction ID: 80306.C94430

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Wes Lamatta

Mailing Address 800 NE Tenney Rd Ste 110-103

City

Vancouver

State

WA

Zip Code

98685-2831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Transaction ID: 80306.C94535

Amount of Each Receipt this Period

10000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Kevin Mannix

Mailing Address 375 18th St NE

City

Salem

State

OR

Zip Code

97301-4307

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Transaction ID: 80306.C94528

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Robert L. McNitt

Mailing Address 40823 Huntley Rd SE

City

Stayton

State

OR

Zip Code

97383-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: 80213.C93897

Amount of Each Receipt this Period

15.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Robert L. McNitt

Mailing Address 40823 Huntley Rd SE

City

Stayton

State

OR

Zip Code

97383-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Transaction ID: 80310.C94660

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mr. Nelson M. Olf

Mailing Address 2736 Magnolia Way

City

Forest Grove

State

OR

Zip Code

97116-1251

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific University

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Transaction ID: 80225.C94066

Amount of Each Receipt this Period

200.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Andrew J. Over

Mailing Address 1485 SW 134th Ave

City

Beaverton

State

OR

Zip Code

97005-0986

FEC ID number of contributing
federal political committee.

C

Name of Employer
Executive Director

Occupation
Oregon Republican Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Transaction ID: 80310.C94695

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Steven Richardson

Mailing Address 1835 Ocean Blvd SE

City

Coos Bay

State

OR

Zip Code

97420-1948

FEC ID number of contributing
federal political committee.

C

Name of Employer
Steven Richardson DMD

Occupation
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 5 / 2 0 0 8

Transaction ID: 80306.C94626

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Marylin Shannon

Mailing Address 7955 Portland Rd NE

City

Brooks

State

OR

Zip Code

97305-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 4 / 2 0 0 8

Transaction ID: 80213.C93905

Amount of Each Receipt this Period

20.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Hubert Slegers

Mailing Address 3576 Eola Dr NW

City

Salem

State

OR

Zip Code

97304-4105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Transaction ID: 80225.C94067

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

420.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 49

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Mr. B. Bond Starker

Mailing Address PO Box 809

City

Corvallis

State

OR

Zip Code

97339-0809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Starker Forests

Occupation
Forester

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 0 / 2 0 0 8

Transaction ID: 80306.C94536

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mr. Mike Tyrholm

Mailing Address 3703 Collier Ln

City

Klamath Falls

State

OR

Zip Code

97603-9644

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tyrholm - Big R, Inc.

Occupation
Retail sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 5 / 2 0 0 8

Transaction ID: 80306.C94225

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

16810.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 49

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Gordon Smith Victory Committee

Mailing Address 228 S Washington St Ste 115

City

Alexandria

State

VA

Zip Code

22314-5404

FEC ID number of contributing
federal political committee.

C C00441287

Name of Employer
Requested 2008

Occupation

Requested 2008

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10071.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: 80213.C93898

Amount of Each Receipt this Period

7063.55

Transfers From Affil./Aut-
h.

B.

Full Name (Last, First, Middle Initial)

Janet Geary

Mailing Address 1211 SW 5th Ave., Suite 2980

City

Portland

State

OR

Zip Code

97204-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 8

Transaction ID: 80219.C93970

Amount of Each Receipt this Period

10000.00

Transfer Memo

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Gordon Smith Victory Committee

Mailing Address 228 S Washington St Ste 115

City

Alexandria

State

VA

Zip Code

22314-5404

FEC ID number of contributing
federal political committee.

C C00441287

Name of Employer
Requested 2008

Occupation

Requested 2008

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6015.95

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Transaction ID: 80225.C94054

Amount of Each Receipt this Period

3007.95

Transfers From Affil./Aut-
h.

SUBTOTAL of Receipts This Page (optional)

10071.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 49

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Dulcich Development LLC - Frank Dulcich

Mailing Address PO Box 97

City State Zip Code
Clackamas OR 97015-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dulcich Development LLC

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Transaction ID: 80319.C94820

Amount of Each Receipt this Period

9600.00

Transfer Memo

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Allyn Ford

Mailing Address PO Box 1088

City State Zip Code
Roseburg OR 97470-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Roseburg Forest Products

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Transaction ID: 80219.C93971

Amount of Each Receipt this Period

1900.00

Transfer Memo

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Gordon Smith Victory Committee

Mailing Address 228 S Washington St Ste 115

City State Zip Code
Alexandria VA 22314-5404

FEC ID number of contributing
federal political committee.

C C00441287

Name of Employer
Requested 2008

Occupation
Requested 2008

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9975.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Transaction ID: 80310.C94684

Amount of Each Receipt this Period

6967.02

Transfers From Affil./Aut-
h.

SUBTOTAL of Receipts This Page (optional)

6967.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 49

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Joan Austin

Mailing Address PO Box 209

City

Newberg

State

OR

Zip Code

97132-0209

FEC ID number of contributing
federal political committee.

C

Name of Employer
A-dec, Inc.

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Transaction ID: 80307.C94630

Amount of Each Receipt this Period

10000.00

Transfer Memo

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

17038.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 49

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☒ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

F. Douglas Day

Mailing Address 4386 Rowan Ave N

City

Keizer

State

OR

Zip Code

97303-5824

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 0 8

Transaction ID: 80213.C93909

Amount of Each Receipt this Period

10000.00

Other Loans

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 49

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Brianne Hyder	Transaction ID: 80319.E13607 Date of Disbursement
Mailing Address 7068 SW Valenta Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div>
City Portland State OR Zip Code 97223-	Amount of Each Disbursement this Period
Purpose of Disbursement Phone reimbursement Candidate Name	<div> <div>96.53</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type PHONE REIMBURSEMENT
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) Brianne Hyder	Transaction ID: 80319.E13591 Date of Disbursement
Mailing Address 7068 SW Valenta Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 9 / 2 0 0 8</div> </div>
City Portland State OR Zip Code 97223-	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Reimbursement Candidate Name	<div> <div>1034.74</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type TRAVEL REIMBURSEMENT
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: 80319.E13592 Date of Disbursement
Mailing Address US Department of Treasury	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 8 / 2 0 0 8</div> </div>
City Ogden State UT Zip Code 84403-	Amount of Each Disbursement this Period
Purpose of Disbursement Pd off orig debt w/bank check #1345 Candidate Name	<div> <div>34205.44</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type PD OFF ORIG DEBT W/BANK CHECK #1345
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

35336.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 49

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Applied Merchant Card Processing

Mailing Address c/o Key Bank
1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
Merchant Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80320.E13630

Date of Disbursement

/ /

Amount of Each Disbursement this Period

243.84

MERCHANT FEES

B. Full Name (Last, First, Middle Initial)
LifeWise

Mailing Address 815 SW Bond St

City Bend State OR Zip Code 97702-

Purpose of Disbursement
Health Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80319.E13582

Date of Disbursement

/ /

Amount of Each Disbursement this Period

354.45

HEALTH INSURANCE

C. Full Name (Last, First, Middle Initial)
LifeWise

Mailing Address 815 SW Bond St

City Bend State OR Zip Code 97702-

Purpose of Disbursement
Health Insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80319.E13581

Date of Disbursement

/ /

Amount of Each Disbursement this Period

354.45

HEALTH INSURANCE

SUBTOTAL of Disbursements This Page (optional)

952.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 49

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Smith Barney Investments

Mailing Address 121 Sw Morrison St Ste 1600

City Portland State OR Zip Code 97204-

Purpose of Disbursement

IRA Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80320.E13625

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

1028.51

IRA CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
Smith Barney Investments

Mailing Address 121 Sw Morrison St Ste 1600

City Portland State OR Zip Code 97204-

Purpose of Disbursement

IRA Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80319.E13614

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

1028.51

IRA CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
World Trade Center & Catering

Mailing Address PO Box 3340

City Portland State OR Zip Code 97208-

Purpose of Disbursement

Catering/OGOP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80313.E13565

Date of Disbursement

02 / 22 / 2008

Amount of Each Disbursement this Period

256.00

CATERING/OGOP

SUBTOTAL of Disbursements This Page (optional)

2313.02

TOTAL This Period (last page this line number only)

38602.47

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 49

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Brianne Hyder	Transaction ID: 80319.E13604 Date of Disbursement
Mailing Address 7068 SW Valenta Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 5 / 2 0 0 8</div> </div>
City Portland State OR Zip Code 97223-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div>1870.93</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Brianne Hyder	Transaction ID: 80319.E13605 Date of Disbursement
Mailing Address 7068 SW Valenta Ct	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div>
City Portland State OR Zip Code 97223-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div>1870.93</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 80320.E13626 Date of Disbursement
Mailing Address c/o Key Bank 1500 Edgewater St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 8</div> </div>
City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Taxes Candidate Name	<div>1923.08</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL TAXES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

5664.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 49

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80320.E13627

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

64.62

FEA PAYROLL TAXES

B. Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80320.E13632

Date of Disbursement

02 / 01 / 2008

Amount of Each Disbursement this Period

1945.14

FEA PAYROLL TAXES

C. Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Mailing Address c/o Key Bank 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA Payroll taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80320.E13631

Date of Disbursement

02 / 21 / 2008

Amount of Each Disbursement this Period

31.64

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

2041.40

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 / 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.**

Full Name (Last, First, Middle Initial)

Amy Langdon

Mailing Address 2830 Foxhaven Dr SE

City State Zip Code
Salem OR 97306-2526Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80320.E13621

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	5	/	2	0	0	8

Amount of Each Disbursement this Period

2100.62

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)

Amy Langdon

Mailing Address 2830 Foxhaven Dr SE

City State Zip Code
Salem OR 97306-2526Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80306.E13534

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

Amount of Each Disbursement this Period

2100.62

FEA PAYROLL

C.

Full Name (Last, First, Middle Initial)

Oregon Department of Revenue

Mailing Address PO Box 14800

City State Zip Code
Salem OR 97309-Purpose of Disbursement
FEA Payroll Taxes

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 80320.E13624

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	0	8

Amount of Each Disbursement this Period

689.83

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

4891.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 / 49

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 80319.E13611 Date of Disbursement
Mailing Address PO Box 14800	<div> <div>MM / DD / YY</div> <div>02 / 15 / 2008</div> </div>
City Salem State OR Zip Code 97309-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll taxes Candidate Name	<div> <div>Amount</div> <div>694.80</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL TAXES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Belinda Smith	Transaction ID: 80320.E13622 Date of Disbursement
Mailing Address 687 SW Concord Way	<div> <div>MM / DD / YY</div> <div>02 / 05 / 2008</div> </div>
City Beaverton State OR Zip Code 97006-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div> <div>Amount</div> <div>624.44</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Belinda Smith	Transaction ID: 80319.E13612 Date of Disbursement
Mailing Address 687 SW Concord Way	<div> <div>MM / DD / YY</div> <div>02 / 15 / 2008</div> </div>
City Beaverton State OR Zip Code 97006-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA Payroll Candidate Name	<div> <div>Amount</div> <div>624.43</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	FEA PAYROLL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1943.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 49

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Janice Williamson

Mailing Address 4065 Mandy Ave SE

City Salem State OR Zip Code 97302-1712

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80320.E13623

Date of Disbursement

/ /

Amount of Each Disbursement this Period

925.16

FEA PAYROLL

B.

Full Name (Last, First, Middle Initial)
Janice Williamson

Mailing Address 4065 Mandy Ave SE

City Salem State OR Zip Code 97302-1712

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 80319.E13613

Date of Disbursement

/ /

Amount of Each Disbursement this Period

898.15

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1823.31

TOTAL This Period (last page this line number only)

16364.39

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 28 / 49

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80213.C93909

LOAN SOURCE Full Name (Last, First, Middle Initial)

F. Douglas Day

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 4386 Rowan Ave N

City Keizer

State OR

ZIP Code

97303-5824

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2D D
0 4Y Y Y Y
2 0 0 8

20080630

.0800 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 29 / 49

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80218.C93964

LOAN SOURCE Full Name (Last, First, Middle Initial)

Michael Scheel

Election:

- ☐
- Primary
-
- ☐
- General
-
- ☐
- Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20080630

.0800 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 / 49

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80218.C93966

LOAN SOURCE Full Name (Last, First, Middle Initial)

Donald Malarkey

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 2495 E Nob Hill St SE

City Salem

State OR

ZIP Code

97302-3733

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20080630

.0800 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 31 / 49

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS80218.C93965

LOAN SOURCE Full Name (Last, First, Middle Initial)

Julie Scheel

Election:

- ☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 1D D
3 1Y Y Y Y
2 0 0 8

20080630

.0800 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

10000.00

TOTALS This Period (last page in this line only) ▶

40000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 32 / 49 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Oregon Republican Party		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; text-align: center;">C00153031</div>	
LENDING INSTITUTION (LENDER) Full Name Day, F. Douglas		Back Ref ID: LS80213.C93909	
Mailing Address 2929 NW Cumberland Rd.		Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: center;">10000.00</div>	
City Portland		Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; text-align: center;">8.000 %</div>	
State OR		Date Incurred or Established <div style="border: 1px solid black; padding: 2px; text-align: center;">02 04 2008</div>	
Zip Code 97210-		Date Due <div style="border: 1px solid black; padding: 2px; text-align: center;">20080630</div>	
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; text-align: center;"> </div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div> Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>			
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>			
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>			
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="border: 1px solid black; padding: 2px; text-align: center;"> </div>		Location of account Key Bank - West Salem Branch Address: 1500 Edgewater St. NW City, State, Zip: Salem OR 97304-	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Charles Oakes Signature		DATE <div style="border: 1px solid black; padding: 2px; text-align: center;">02 04 2008</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Douglas Day Signature		DATE <div style="border: 1px solid black; padding: 2px; text-align: center;">02 04 2008</div>	
Title Lender			

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 33 / 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
AristotleNature of Debt (Purpose):
Software & support

Mailing Address 205 Pennsylvania Ave SE

City State ZIP Code
Washington DC 20003-

Outstanding Balance Beginning This Period

1950.00

Transaction ID: LS80319.E13586

Amount Incurred This Period

1950.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3900.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS ConnectNature of Debt (Purpose):
Party Building telemarket-
ing

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

42015.14

Transaction ID: LSE8547

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

42015.14

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, IncNature of Debt (Purpose):
Party Building/Direct mail

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

14628.27

Transaction ID: LS71218.E13366

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14628.27

1) SUBTOTALS This Period This Page (optional).....

60543.41

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 / 49

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
United States Treasury

Nature of Debt (Purpose):
Interest

Mailing Address US Department of Treasury

City State ZIP Code
Ogden UT 84403-

Outstanding Balance Beginning This Period

32488.48

Transaction ID: LS80319.E13592

Amount Incurred This Period

1716.96

Payment This Period

34205.44

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Office Depot

Nature of Debt (Purpose):
Office Supplies

Mailing Address 10520 SW Cascade Blvd

City State ZIP Code
Tigard OR 97223-

Outstanding Balance Beginning This Period

551.22

Transaction ID: LS80307.E13546

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

551.22

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
South Salem Mini Storage

Nature of Debt (Purpose):
Storage Rental

Mailing Address 5585 SE Commercial St

City State ZIP Code
Salem OR 97306-

Outstanding Balance Beginning This Period

90.00

Transaction ID: LS80319.E13602

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

90.00

1) SUBTOTALS This Period This Page (optional).....

641.22

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 35 / 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Electric LightwaveNature of Debt (Purpose):
Auto phone service

Mailing Address PO Box 20553

City State ZIP Code
Rochester NY 14602-

Outstanding Balance Beginning This Period

348.88

Transaction ID: LSE8400

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

348.88

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Certified PropertyNature of Debt (Purpose):
Feb. Rent

Mailing Address PO Box 269

City State ZIP Code
Salem OR 97308-0269

Outstanding Balance Beginning This Period

40667.42

Transaction ID: LS80218.E13495

Amount Incurred This Period

6331.82

Payment This Period

46999.24

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase PowerNature of Debt (Purpose):
Postage Check by phone

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-

Outstanding Balance Beginning This Period

5487.69

Transaction ID: LS80313.E13566

Amount Incurred This Period

0.00

Payment This Period

2144.34

Outstanding Balance at Close of This Period

3343.35

1) **SUBTOTALS** This Period This Page (optional).....

3692.23

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 36 / 49

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kevin Hoar

Nature of Debt (Purpose):
consulting

Mailing Address 12563 NW Millford St

City State ZIP Code
Portland OR 97229-9303

Outstanding Balance Beginning This Period

2419.66

Transaction ID: LS71218.E13369

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2419.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Eagle Teleconferencing

Nature of Debt (Purpose):
phone bill

Mailing Address 207 West Washington Street

City State ZIP Code
Rushville IL 62681-

Outstanding Balance Beginning This Period

183.84

Transaction ID: LS50920.E11778

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

183.84

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Eagle Teleconferencing

Nature of Debt (Purpose):
Teleconferencing

Mailing Address 207 West Washington Street

City State ZIP Code
Rushville IL 62681-

Outstanding Balance Beginning This Period

352.50

Transaction ID: LS80310.E13560

Amount Incurred This Period

565.94

Payment This Period

352.50

Outstanding Balance at Close of This Period

565.94

1) SUBTOTALS This Period This Page (optional).....

3169.44

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 37 / 49

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T Wireless

Nature of Debt (Purpose):
Telephone/Total debt in
dispute

Mailing Address PO Box 30459

City State ZIP Code
Los Angeles CA 90030-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: LSE11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Freres Lumber Co. Inc.

Nature of Debt (Purpose):
Excess Levin Contribution
Refund

Mailing Address PO Box 276

City State ZIP Code
Lyons OR 97358-0276

Outstanding Balance Beginning This Period

2500.00

Transaction ID: LS71120.E13313

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Corporate Card

Nature of Debt (Purpose):
Office Equipment

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

7224.98

Transaction ID: LS80218.E13500

Amount Incurred This Period

263.20

Payment This Period

101.20

Outstanding Balance at Close of This Period

7386.98

1) **SUBTOTALS** This Period This Page (optional).....

77067.88

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 38 / 49

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Corporate Card

Nature of Debt (Purpose):
DEBT 12/07

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

394.50

Transaction ID: LS80218.E13483

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

394.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Barbs Professional Bookkeeping &Tax

Nature of Debt (Purpose):
Bank reconciliation servi-
ces

Mailing Address 3295 Triangle Dr. SE #112

City State ZIP Code
Salem OR 97302-

Outstanding Balance Beginning This Period

962.50

Transaction ID: LS71218.E13363

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

962.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IN Compliance Inc.

Nature of Debt (Purpose):
Consulting Treasury/Sept-
Oct Amend

Mailing Address PO Box 751271

City State ZIP Code
Las Vegas NV 89131-

Outstanding Balance Beginning This Period

23381.30

Transaction ID: LS80313.E13574

Amount Incurred This Period

0.00

Payment This Period

2000.00

Outstanding Balance at Close of This Period

21381.30

1) **SUBTOTALS** This Period This Page (optional).....

22738.30

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 39 / 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Card - FederalNature of Debt (Purpose):
Auto Exps & Off Supp/CC
DEBT 4/07

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

1106.84

Transaction ID: LS70801.E12959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1106.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Discover Card - FederalNature of Debt (Purpose):
OGOP Office Supplies/ CC
DEBT 11/07

Mailing Address PO Box 30423

City State ZIP Code
Salt Lake City UT 84130-0423

Outstanding Balance Beginning This Period

360.35

Transaction ID: LS71220.E13392

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

360.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lynx Group Inc.Nature of Debt (Purpose):
OGOP Printing

Mailing Address 2746 Front St Ne

City State ZIP Code
Salem OR 97301-

Outstanding Balance Beginning This Period

493.00

Transaction ID: LS80307.E13542

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

493.00

1) SUBTOTALS This Period This Page (optional).....

1960.19

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 40 / 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
D.R. Johnson Lumber Co.Nature of Debt (Purpose):
Excess Levin Contribution
Refund

Mailing Address PO Box 66

City State ZIP Code
Riddle OR 97469-

Outstanding Balance Beginning This Period

10000.00

Transaction ID: LS71120.E13314

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
World Trade Center & CateringNature of Debt (Purpose):
Catering/OGOP

Mailing Address PO Box 3340

City State ZIP Code
Portland OR 97208-

Outstanding Balance Beginning This Period

9017.04

Transaction ID: LS80313.E13565

Amount Incurred This Period

0.00

Payment This Period

256.00

Outstanding Balance at Close of This Period

8761.04

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Complete CampaignsNature of Debt (Purpose):
Data base system

Mailing Address 610 Gateway Center Way Ste K

City State ZIP Code
San Diego CA 92102-4548

Outstanding Balance Beginning This Period

1000.00

Transaction ID: LS80219.E13506

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) SUBTOTALS This Period This Page (optional).....

19761.04

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 41 / 49

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Complete CampaignsNature of Debt (Purpose):
Database system

Mailing Address 610 Gateway Center Way Ste K

City	State	ZIP Code
San Diego	CA	92102-4548

Outstanding Balance Beginning This Period

875.00

Transaction ID: LS71218.E13365

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

875.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

875.00

2) **TOTALS** This Period (last page this line number only)..... ▶

190448.71

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

40000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

230448.71

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 42 / 49
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Certified Property

Mailing Address

PO Box 269

City	State	Zip Code
Salem	OR	97308-0269

Purpose of Disbursement:
RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42876.47

Date 02 / 05 / 2008

Transaction ID: H480218.E13495

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14640.27

26027.15

40667.42

B. Full Name (Last, First, Middle Initial)

Certified Property

Mailing Address

PO Box 269

City	State	Zip Code
Salem	OR	97308-0269

Purpose of Disbursement:
Feb. RentCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

49774.81

Date 02 / 13 / 2008

Transaction ID: H480218.E13498

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2279.46

4052.36

6331.82

C. Full Name (Last, First, Middle Initial)

Network Solutions

Mailing Address

PO Box 17305

City	State	Zip Code
Baltimore	MD	21297-

Purpose of Disbursement:
Webhosting/CC debt 0208Category/
TypeActivity or Event Identifier:
ADMINISTRATION B 2**[MEMO ITEM]** Webhosting/CC debt 0208

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

46.99

Date 02 / 29 / 2008

Transaction ID: H480218.E13502

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16.92

30.07

46.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16919.73

30079.51

46999.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 43 / 49
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Vonage Telephone

Mailing Address

2147 Route 27

City State Zip Code

Edison NJ 08817-

Purpose of Disbursement:
 Telephone/CC debt 0208

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] Telephone/CC debt 0208

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54.21

Date M M / D D / Y Y Y Y

02 / 29 / 2008

Transaction ID: H480218.E13503

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.52

34.69

54.21

B. Full Name (Last, First, Middle Initial)
 U.S. Postmaster

Mailing Address

Tigard or Main Branch

City State Zip Code

Tigard OR 97223-

Purpose of Disbursement:
 Postage/CC Debt 0208

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

[MEMO ITEM] Postage/CC Debt 0208

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

123.00

Date M M / D D / Y Y Y Y

02 / 29 / 2008

Transaction ID: H480218.E13504

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

44.28

78.72

123.00

C. Full Name (Last, First, Middle Initial)
 Eagle Teleconferencing

Mailing Address

207 West Washington Street

City State Zip Code

Rushville IL 62681-

Purpose of Disbursement:
 Teleconferencing

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43442.99

Date M M / D D / Y Y Y Y

02 / 12 / 2008

Transaction ID: H480310.E13560

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

126.90

225.60

352.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

126.90

225.60

352.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 44 / 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Pitney Bowes Purchase Power

Mailing Address

PO Box 856042

City	State	Zip Code
Louisville	KY	40285-

Purpose of Disbursement:
Equipment TaxCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52501.88

Date 02 / 22 / 2008

Transaction ID: H480313.E13566

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.16		89.18		139.34

B. Full Name (Last, First, Middle Initial)
Eschelon Teleco (Advanced Telecom)

Mailing Address

PO Box 34988

City	State	Zip Code
Seattle	WA	98124-1988

Purpose of Disbursement:
TelephoneCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

56026.02

Date 02 / 22 / 2008

Transaction ID: H480313.E13567

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
474.89		844.25		1319.14

C. Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address

10520 SW Cascade Blvd

City	State	Zip Code
Tigard	OR	97223-

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52287.69

Date 02 / 22 / 2008

Transaction ID: H480313.E13568

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.17		119.41		186.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
592.22		1052.84		1645.06

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 45 / 49
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Eagle Security

Mailing Address

PO Box 4531

City State Zip Code

Salem OR 97302-

Purpose of Disbursement:
Security SystemCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52362.54

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	2	/	2	0	0	8

Transaction ID: H480313.E13569

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.95

47.90

74.85

B. Full Name (Last, First, Middle Initial)

Ricoh Customer Finance Corp.

Mailing Address

PO Box 310010273

City State Zip Code

Pasadena CA 91110-0001

Purpose of Disbursement:
Equipment LeaseCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

56185.02

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	2	/	2	0	0	8

Transaction ID: H480313.E13570

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

57.24

101.76

159.00

C. Full Name (Last, First, Middle Initial)

Pitney Bowes Purchase Power

Mailing Address

PO Box 856042

City State Zip Code

Louisville KY 40285-

Purpose of Disbursement:
Postage, Check by phoneCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54506.88

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	2	/	2	0	0	8

Transaction ID: H480313.E13571

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

721.80

1283.20

2005.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

805.99

1432.86

2238.85

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 46 / 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Dell Financial

Mailing Address

PO Box 120001

City	State	Zip Code
Dallas	TX	75312-

Purpose of Disbursement:
Equipment lease/ServerCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2209.05

Date 02 / 02 / 2008

Transaction ID: H480313.E13573

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.03		62.27		97.30

B. Full Name (Last, First, Middle Initial)

IN Compliance Inc.

Mailing Address

PO Box 751271

City	State	Zip Code
Las Vegas	NV	89131-

Purpose of Disbursement:
Consulting Treasury/Sept-Oct AmendCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

51974.81

Date 02 / 13 / 2008

Transaction ID: H480313.E13574

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
720.00		1280.00		2000.00

C. Full Name (Last, First, Middle Initial)

Office Depot

Mailing Address

10520 SW Cascade Blvd

City	State	Zip Code
Tigard	OR	97223-

Purpose of Disbursement:
Office SuppliesCategory/
TypeActivity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42996.49

Date 02 / 06 / 2008

Transaction ID: H480313.E13575

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.21		76.81		120.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
798.24		1419.08		2217.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 47 / 49
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Dell Financial

Mailing Address

PO Box 120001

City State Zip Code
 Dallas TX 75312-

Purpose of Disbursement:
 Equipment lease/ Server;

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52101.11

Date M M / D D / Y Y Y Y
 0 2 / 1 9 / 2 0 0 8

Transaction ID: H480313.E13576

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.47		80.83		126.30

B. Full Name (Last, First, Middle Initial)
 Legislative Administration

Mailing Address

900 Court St NE Rm 140C

City State Zip Code
 Salem OR 97301-4041

Purpose of Disbursement:
 News Conference

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43090.49

Date M M / D D / Y Y Y Y
 0 2 / 1 1 / 2 0 0 8

Transaction ID: H480313.E13577

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.60		6.40		10.00

C. Full Name (Last, First, Middle Initial)
 US Postmaster

Mailing Address

410 Mill St SE

City State Zip Code
 Salem OR 97301-

Purpose of Disbursement:
 P O Box Rental

Category/
Type

Activity or Event Identifier:
 ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43080.49

Date M M / D D / Y Y Y Y
 0 2 / 0 6 / 2 0 0 8

Transaction ID: H480313.E13578

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.24		53.76		84.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.31		140.99		220.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 48 / 49
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address

410 Mill St SE

City State Zip Code
Salem OR 97301-

Purpose of Disbursement:
Business Reply Mail (postage)

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

49974.81

Date M M / D D / Y Y Y Y
0 2 / 1 3 / 2 0 0 8

Transaction ID: H480313.E13579

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.00

128.00

200.00

B. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address

410 Mill St SE

City State Zip Code
Salem OR 97301-

Purpose of Disbursement:
Business Reply Mail (Postage)

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54706.88

Date M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 0 8

Transaction ID: H480313.E13580

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.00

128.00

200.00

C. Full Name (Last, First, Middle Initial)
Textron Financial

Mailing Address

40 Westminster Street

City State Zip Code
Providence RI 02903-

Purpose of Disbursement:
Rent

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

59890.84

Date M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Transaction ID: H480319.E13583

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1297.66

2306.96

3604.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1441.66

2562.96

4004.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 49 / 49
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

AT&T Wireless

Mailing Address

PO Box 30459

City State Zip Code

Los Angeles CA 90030-

Purpose of Disbursement:

Telephone/Hyder

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] Telephone/Hyder

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

96.53

Date 02 / 19 / 2008

Transaction ID: H480319.E13603

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

34.75

61.78

96.53

B. Full Name (Last, First, Middle Initial)

AT&T Wireless

Mailing Address

PO Box 30459

City State Zip Code

Los Angeles CA 90030-

Purpose of Disbursement:

Telephone/Hyder

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] Telephone/Hyder

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

96.53

Date 02 / 01 / 2008

Transaction ID: H480319.E13608

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

34.75

61.78

96.53

C. Full Name (Last, First, Middle Initial)

Discover Corporate Card

Mailing Address

PO Box 30423

City State Zip Code

Salt Lake City UT 84130-0423

Purpose of Disbursement:

Office Equipment

Category/
Type

Activity or Event Identifier:

ADMINISTRATION B 2

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

56286.22

Date 02 / 22 / 2008

Transaction ID: H480319.E13616

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.43

64.77

101.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.43

64.77

101.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

20800.48

36978.61

57779.09